



Fresh Fruit and Vegetable Program (FFVP) Signature Page

This certification form must be signed by your district's superintendent, school principal, and food service director, indicating their acknowledgment of and support for this program. This document must be uploaded to the *Attachment List* within MAPS.

CERTIFICATION OF SUPPORT AND AGREEMENT

We have reviewed the FFVP application in MAPS and attest to the information provided. We agree to implement the program as outlined in the National School Lunch Act, Section 19, and the [FFVP Handbook](#) and in a manner consistent with the policies and procedures established by USDA and MT OPI. Furthermore, we agree to participate in any mandatory FFVP trainings and/or USDA sponsored evaluations and to provide the information requested by specified deadlines. The signatures on this page as well as on any other documents submitted by the school for FFVP, certify to the support of administration and school staff and their commitment to having a successful FFVP program.

District/Sponsor Information	
District Name:	

SIGNATURES

District Superintendent (school may determine equivalent position)		
Name (Print)	Signature	Date
School Principal (school may determine equivalent position)		
Name (Print)	Signature	Date
Food Service Director (school may determine equivalent position)		
Name (Print)	Signature	Date